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CONFIRMATION NO. 8674

<b>SERIAL NUMBER</b> 10/500,883	<b>FILING OR 371(c) DATE</b> 11/05/2004 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1636	<b>ATTORNEY DOCKET NO.</b> 3198-101
<b>APPLICANTS</b> Ario DeMarco, Heidelberg, GERMANY; Arie Geerlof, Hamburgs, GERMANY; Bernd Bukau, Heidelberg, GERMANY; Elke Deuerling, Freiburg, GERMANY;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IB03/00299 01/07/2003 <i>mk8</i>				
<b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0200250.9 01/07/2002 <i>mk8</i> UNITED KINGDOM 0209013.2 04/19/2002				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Michelle Spiller mk8</i> Examiner's Signature Initials	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 19	<b>TOTAL CLAIMS</b> 46	<b>INDEPENDENT CLAIMS</b> 9
<b>ADDRESS</b> 6449				
<b>TITLE</b> Recombinant protein expression				
<b>FILING FEE RECEIVED</b> 1017	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	